

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2000

Application or Docket Number

09/690 437

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| TOTAL CLAIMS                     |   |              |                          |
|----------------------------------|---|--------------|--------------------------|
| FOR                              |   | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 8 | minus 20=    | =                        |
| INDEPENDENT CLAIMS               | 2 | minus 3=     | =                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |   |              | <input type="checkbox"/> |

SMALL ENTITY  
TYPE  (2) OR OTHER THAN  
SMALL ENTITY

| RATE      | FEES   | RATE | FEES             |
|-----------|--------|------|------------------|
| BASIC FEE | 355.00 | OR   | BASIC FEE 710.00 |
| X\$ 9=    |        | OR   | X\$18=           |
| X40=      |        | OR   | X80=             |
| +135=     |        | OR   | +270=            |
| TOTAL     | 355.   | OR   | TOTAL            |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | MINUS | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------|---|------------------|
|  |   |       |   |                  |
| Total  | 8   | Minus | 20  | =                |
| Independent                                    | 2   | Minus | 3   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       | <input type="checkbox"/>                    |                  |

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

| RATE            | ADDI-<br>TIONAL<br>FEE | RATE | ADDI-<br>TIONAL<br>FEE |
|-----------------|------------------------|------|------------------------|
| X\$ 9=          |                        | OR   | X\$18=                 |
| X40=            |                        | OR   | X80=                   |
| +135=           |                        | OR   | +270=                  |
| TOTAL ADDT. FEE |                        | OR   | TOTAL ADDT. FEE        |

1/24/05

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | MINUS | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------|---|------------------|
|  |   |       |   |                  |
| Total  | 8   | Minus | 20  | =                |
| Independent                                    | 2   | Minus | 3   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       | <input type="checkbox"/>                    |                  |

| RATE            | ADDI-<br>TIONAL<br>FEE | RATE | ADDI-<br>TIONAL<br>FEE |
|-----------------|------------------------|------|------------------------|
| X\$ 9=          |                        | OR   | X\$18=                 |
| X40=            |                        | OR   | X80=                   |
| +135=           |                        | OR   | +270=                  |
| TOTAL ADDT. FEE |                        | OR   | TOTAL ADDT. FEE        |

6/20/05

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | MINUS | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------|---|------------------|
|  |   |       |   |                  |
| Total  | 8   | Minus | 20  | =                |
| Independent                                    | 2   | Minus | 3   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       | <input type="checkbox"/>                    |                  |

| RATE            | ADDI-<br>TIONAL<br>FEE | RATE | ADDI-<br>TIONAL<br>FEE |
|-----------------|------------------------|------|------------------------|
| X\$ 9=          |                        | OR   | X\$18=                 |
| X40=            |                        | OR   | X80=                   |
| +135=           |                        | OR   | +270=                  |
| TOTAL ADDT. FEE |                        | OR   | TOTAL ADDT. FEE        |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

3EST AVAILABLE COPY